## ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE					
FEE DETERMINATION								
O.I.P.E. CLASSIFIER								
FORMALITY REVIEW			<u> </u>					
RESPONSE FORMALITY REVIEW	×2		1-5-01					

## INDEX OF CLAIMS

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If more than 150 claims or 10 actions staple additional sheet here